

From: WMATC E-Filing <compliance@wmatc.gov>
Sent: Friday, June 19, 2015 5:34 PM
To: Constantine Kolouas; Chris Aquino; Shanelle N. Hayes
Subject: 2687: General Tariff
Attachments: 55848ac4f1b5f-Tariff.doc

**WASHINGTON METROPOLITAN AREA TRANSIT COMMISSION
GENERAL TARIFF COVER**

General Tariff No. GT- 1
Date Filed at WMATC: 06/19/2015
Date Effective: JUL - 7 2015

1. WMATC Certificate of Authority No.: 2687

2. Carrier Name on Certificate of Authority: Ibex Transportation LLC
Street: 1208 Longfellow St. NW, Apt./Suite:
City: Washington
State:DC
Zip: 20011
Telephone Number: 2022155658

3. Person authorized to file tariff on behalf of Carrier
Name: Samuel Ashine
Title: Operation Manager
Telephone Number: 2022155658

4. Date this tariff actually filed with WMATC: 06/19/2015

5. Date seven (7) calender days after date on Line 4: 06/26/2015

6. Effective Date of this tariff (not earlier than date on line 5):

***Your general tariff was attached to your submission.**

NOTE: SEE COMMISSION REGULATION NOS. 55 AND 56. IF YOU HAVE A QUESTION ABOUT HOW TO COMPLETE THIS FORM, CALL THE COMMISSION AT (301) 588-5260.



WMATC Certificate NO.:2687

General Tariff

<i>The following vehicles are currently available for transportation</i>						
<i>Vehicle VIN No.</i>	<i>Year</i>	<i>Model</i>	<i>Plate No</i>	<i>Expiration Date</i>	<i>No of Ambulatory seat</i>	<i>No of non Ambulatory sea</i>
2C4RDGCG1CR138475	2012	Dodge Caravan	B48000	05/11/17	5	1 Wheelchair
2C4RDGBG0DR822260	2013	Dodge Caravan	B47798	06/15/17	4	2 Wheelchair
2C4RDGCG1ER128709	2014	Dodge Caravan	B47799	06/15/16	4	2 Wheelchair
5TDKK3DC9BS142193	2011	Toyota Sienn	B48969	06/01/15	7	0

General Service are: Washington DC metro only

<i>Types of fare</i>	<i>Ambulatory rate/person/trip</i>	<i>Non ambulatory rate/person/trip</i>
Flat rate	\$30	\$45
Minimum fare	\$0	\$0
Additional fare	\$0	\$0
No show	\$0	\$0

For Ambulatory patients:

- *Ibex Transportation charges \$30.00 for one way trip from any part of Washington DC area to any part inside the Washington DC zone.*

Example of: An ambulatory patient picked up from

1408 H Street, Washington DC to DaVita International Dialysis Center at 1730 Hamlin St NE, Washington, DC 20018.

The rate for this patent is \$30 for one way and \$60 for round trip

Example of: Non ambulatory patient picked up from the same location

1408 H Street, Washington DC to DaVita International Dialysis Center at 1730 Hamlin St NE, Washington, DC 20018.

The rate for this patent is \$45 for one way and \$90 for round trip